tive materials in packaging, railway sleepers, building construction, furniture etc.

8. Efforts are being made to control shifting cultivation.

9. Guidelines have been issued to State/UT Governments from time to time for protection of forests. Some of these guidelines are as follows:

i) To avoid felling of natural forests and where such felling is inevitable on silvicultural considerations, it should be restricted to areas not exceeding 10 hectares in the hills, and 25 hectares in the plains.

ii) To consider banning of green felling in the hills and mountains above 1000 metres.

iii) To set apart 4% of the geographical area as protection area under wildlife sanctuaries, national parks & biosphere reserve and others.

Manufacture of Coaches

889. SHRI ARVIND TRIVEDI:Will the Minister of RAILWAYS be pleased to state:

(a) whether a large number of Railway coaches are likely to be required in the coming years;

(b) if so, the details of planning to meet the demand of Railway coaches in future;

(c) if not, the reasons therefor; and

(d) the number of coaches being manufactured by the Government per year at present?

THE MINISTER OF STATE IN THE MINISTRY OF RAILWAYS (SHRI MALLIKARJUN): (a) Yes, Sir.

(b) Works have been sanctioned to increase the production capacity of coaches, from 1000 to 1150 coaches per year at Integral Coach Factory, Madras, and a new unit has been set up at Kapurthala to produce 1000 coaches per year.

(c) Does not arise.

(d) About 2200 coaches are being produced per annum by Railways including production in Public Sector Undertakings.

Implementation of Tikku Committee

890. SHRI ATAL BIHARI VAJPAYEE:
SHRI LAL. K. ADVANI:
SHRI CHANDRESH PATEL:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the recommendations of the Tikku Committee; and

(b) the reaction of the Government and the doctors thereon?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SMT. D.K. THARA DEVI SIDDHARTHA): (a) A statement showing the recommendations of the Tikku Committee is attached.

(b) The Government has announced its decisions on the recommendations of the Tikku Committee vide O.M.No. A. 45013/13/90-CHS-V dated 14.11.1991 (Annexure) There is mixed reaction of the doctors on the recommendations of Tikku Committee.

STATEMENT

1. Officers of the GDMO Sub-Cadre may be promoted to the grade of CMO after they have put in 10 years of service on seniority-cum-fitness basis without linkage such promotions to vacancies.

2. The Government may consider bringing in uniformity in the pay scales of Senior Medical Officers and Specialists Gr. II.

3. Officers of the GDMO Sub-Cadre may be promoted to the grade of Rs. 4500-5700 on completion of 14 years of service without linking to vac. ncies. The selection for such promotion will be the same as for selection to the grade Rs. 4500-5700/- recommended for the Specialists Grades.

4. Over a period of time the ratio between the posts in the GDMO Sub-Cadre to posts in other Sub-Cadre may be brought down to 1:1.

5. 250 posts of Medical Officers may be transferred as Specialist Gr. II posts in the non teaching sub-cadre. As a one time measure these posts may be filled by internal recruitment from amongst the eligible Post-Graduate Degree and Diploma holders in the GDMO Sub-cadre.

6. 100 posts may be created in the senior scale of Specialists Gr.II in the non teaching Specialists Sub-Cadre for internal recruitment after formally amending recruitment rules.

7. The number of posts vacated by the PG GDMOs on their appointment as Specialists Gr.II in the non-teaching sub-cadre may also be transferred to non teaching specialists Gr.II for recruitment in the normal course.

8. The Recruitment Rules for Specialist Gr.II in the non teaching sub-cadre may be amended to provide for 75% by promotion and 25% by direct recruitment Eligible Post-Graduate GDMOs with one year service in the CHS may be made eligible for promotion to the post earmarked for promotion quota.

9. Post-Graduate GDMOs who are now eligible and willing may be appointed as Teaching Specialists Gr.II after pre-screening and the posts vacated by them in the GDMO Sub-Cadre may be abolished.

10. As a very special case an operation to revert the GDMO sub-cadre may be given to those who had in earlier years moved over from GDMO Sub-Cadre to Specialists'sub-cadres.

11. In future Post Graduate Degree holders who join the GDMO Sub-Cadre may be granted 2 years ante—dated-seniority. Similarly Post-Graduate Diploma holders may be given on one year ante dated seniority. Post Graduate allowance may be abolished for future entrants.

12. Specialist Gr.II in the Teaching Sub-Cadre who are granted the senior scale of Rs. 3700-5000 may be promoted to the grade of Rs. 4500-5700 after they complete 4 years of service.

13. Recruitment rules for the post of Asstt. Professors in the Teaching Specialists Sub-Cadre may be reviewed and suitably amended taking into account the MCI regulations. If the rules are amended in such a way that no experience after acquiring PG degree is required for appointment as Asstt.Professors, Asstt. Professors may be placed in the scale of Rs. 3700-5000 after 4 years as against the present requirement of 2 years.

14. If a doctor with qualifications of DM, MCH or equivalent qualifications is recruited to the CHS, he may be granted two advance increments in the grade in which he is recruited.

15. The functional grade of Rs. 4500-5700 and non functional placement grade of Rs. 4500-5700 in the three Specialists Sub-Cadre may be merged. Specialists Gr.II Officers in the Senior time Scale may be promoted to the merged grade of Rs. 4500-

5700 on completion of 4 years. The promotion shall be by selection. Officers may be considered for promotion in order of their seniority subject to their clearing the bench mark of "Very Good". There will be no zone of selection.

16. CHS rules may be amended to provide for lateral induction at the level of Rs. 4500-5700 as well as Rs. 3700-5000 in the Specialists Grade and posts may be created on yearly basis to the extent and necessary for direct recruitment,

17. As a one time measure officers who have been brought in to Group A CHS services on 1.1.1973, may be promoted to the SAG in situ basis (as personal) in the phased manner so that all of them who are selected by a DPC may be in SAG by the middle of 1992. In CGHS, 120, 75, 50, and 50 officers may be given promotion in-situ during 1990, 1991, 1992 and 1993. Similarly, 250,100, 75 and 75 officers may be graded in Railways Medical Service during the corresponding periods. Sufficient number of posts as are functionally justified may be created in SAG with in a period of 6, to 9 months. The number of SAG posts in CHS identified on functional justification may be of the order of 15% of the total cadre. The officers who are given promotion in-situ may be adjusted against the sanctioned posts. The posts held by others which cannot be so adjusted will revert to the original grade of their ceasing to hold those posts.

18. 30 posts in the Teaching Subcadre, 45 posts in the non-teaching subcadre and one post in the Public Health subcadre may be upgraded to SAG from the functional grade of Rs. 4500-5700 during 1990, 1991 and 1992 to improve the prospects of promotion of specialists.

19. The posts of Professor in the grade of Rs. 5900-6700 may be designated as Senior Professors and any post sanctioned in the Teaching Sub-Cadre in the grade of Rs. 7300-7600 may be designated as Director-Professor.

20. 8 Posts of SAG in the CHS may be upgraded to the Grade Rs. 7300-7600 and 3 new posts of Addi. DG may be created. There functionally justified HAG posts may be sanctioned upto 1% of the total cadre strength.

21. 5 posts of Addl. DG (existing 2 plus new creations) may be operated in the pay scale of Rs. 7300-8000 on the lines of posts in the postal Board. Central Board of Direct Taxes and Central Board of Excise & Customs.

22. The cadre management relating to CHS should by and large rest with the Directorate General of Health Services subject to that is stated in this para.

23. The Director General of Railway Medical Service may be upgraded to the scale of pay Rs. 8000 fixed. Nine posts of SAG may be upgraded to pay scale of Rs. 7300-7600. Two posts in the Grade Rs. 7300-8000 may be created by the Railway Board by abolishing one post in Rs. 7300-7600.

24. The guidelines for creation of post in SAG as one time measure as well as up-grading posts in the pay scale Rs. 7300-7600 may also be applied for posts in Indian Ordinance Factories and Municipal Corporation of Delhi.

25. As a long-term measure, Government may examine the introduction of a modified flexible complementing scheme for the officers of the CHS and Allied Cadres to ensure prospects of promotion to them as the conventional method of sanction of higher level posts in these cadrs for carees progressing is difficult.

26. On merits of the demand considered in isolation, we recommend increasing the age of retirement of doctors to 60. The Govt. may, however, take a decision in the matter in the context of the general policy of the Govt.

27. 'The benefit of added years of service' available under rule 30 of CCS (Pension) Rules may also be made applicable for recruitment to the GDMOs subcadre even in respect of MBBS degree holders by suitable amendment of rules.

28. The formation of the Indian Medical and Health Services should be taken up for implementation even if all the State Governments do not participate initially.

29. All new entrants to the CHS should undergo a basic course of training of 8 to 12 weeks' duration. Refresher course should be arranged at 3 levels viz. Executive, advisory and Higher Administrative.

30. Adequate opportunity should be provided to the doctors to endure continuing Medical Education.

31. Study leave provisions may be amended to provide for Study Leave for 3 years instead of 2 years as Post Graduate courses are of the 3 years duration in the medical field.

32. A High level Expert Group should be appointed to examine the whole structure for provision of Medical and Health Services which may go into such matters like conventing Central Health the Services as on unitied cadre and measures to restrict intake of the officers at the entry level by operating a percentage of posts at base level by deputation and short-term contract.

Office Memorandum

Sub: Recommendations of the High Power (Tikku Committee) on service doctors -decision thereon.

A Committee had been set up under the Chairmanship of Shri R.K.Tikku, Secretary (Coordination) in the Cabinet Secretariat of the Government of India, to look into all aspects of career improvement and cadre restructuring of the doctors of the Central Health Service. The Committee has since submitted its Report. The various recommendations contained in the Report have been carefully considered and the Government of India have taken the following decisions:-

(1) Two additional posts of Additional Directors General of Health Services (Rs. 7300-7600) shall be created by upgrading two of the existing common senior Administrative Grade Posts (Rs. 5900-6700). Appointment to these additional posts of Additional Directors General will be made on the same lines as the existing posts of Additional Directors General).

(2) Four additional posts in the scale of Rs. 7300-7600 shall be operated under Rule 4(9) of the Central Health Service Rules, 1982, by upgradation of 4 posts in the Supertime scale of Rs. 5900-6700.

(3) 34 additional posts of Directorate Professors (Rs. 5900-6700) shall be created in the Teaching Specialists Sub-Cadre of the Central Health Service by upgrading an equivalent number of posts of Professor (Rs. 4500-5700) on floating basis.

(4) 35 additional posts of Consultants (Rs. 5900-6700) shall be created in the Non-teaching Specialists Sub-Cadre of the Central Health Service by upgrading an equivalent number of posts of Specialists

Grade I (Rs. 4500-5700) on floating basis.

(5) The distinction on between the Non-Functional Selection Grade (Rs. 4500-5700) and Functional Grade (Rs. 4500-5700) will be eliminated in the Central Health Service. All Associate Professors in Non-Functional Selection Grade (Rs. 4500-5700) shall be designated as Professors from 1.12.1991. All Specialists Grade II Officers (Non teaching and Public Health Sub-Cadres) in the Non-Functional Selection Grade (Rs. 4500-5700) shall be designated as Specialists Grade I w.e.f. 1.12.1991.

(6) All Professors (Rs.4500-5700) and Specialists Grade I officers (Non-teaching and Public Health Sub cadres) will be eligible for consideration for promotion to the Senior Administrative Grade level posts (Rs. 5900-6700) subject to availability of vacancies, provided they have completed at least 3 years of regular service in the scale of Rs. 4500-5700 irrespective of whether the said service was performed in the Functional Grade or Non-functional Grade of Rs. 4500-5700. The Associate Professors and Specialists Grade II, officers presentaly in the Non-Functional Selection Grade and to be designated as Professors and Specialists Grade I Officers respectively from 1.12.1991, shall an masse be placed below the existing Professors and Specialists Grade I officers respectively for the purpose of preparing eligibility lists for consideration for promotion to Senior Administrative Grade level posts (5900-6700).

(7) As in the case of Teaching Sub-cadre, so also in the sub-cadre of Non-teaching Specialists and Public Health Specialists, the minimum essential qualification for recruitment as Specialist Grade II Officers (Rs. 3000-5000) shall, inter-alia, be a postgraduate degree with three year's experience after obtaining the postgraduate degree, or postgraduate diploma with five years experience after obtaining the postgraduate diploma. All Specialists Grade II officers, recruited in accordance with the modified Recruitment. Rules as mentioned above, shall be promoted to the scale of Rs. 3700-5000 on completion of 2 years of service in the scale of Rs. 3000-5000, subject to seniority-cum-fitness.

(8) Recruitment to the posts belonging to Super Specialists for which the essential minimum qualification is, inter-alia, DM or MCH or equivalent, shall be made in the scale of Rs. 3700-5000 in the Teaching/ Non teaching Specialists Sub-cadres.

(9) In all the three Sub cadres, (Teaching, Non-teaching, and Public Health), officers with 6 years service in the scale of Rs. 3700-5000, or total 8 years service in the scale of Rs. 3000-5000 and Rs. 3700-5000, shall be placed in the scale of Rs. 4500-5700 according to existing guidelines which (inter-alia, provide for over all good performance and at least two "very good" assessment during the preceding 5 years). On such placement in the scale of Rs. 4500-5700, the Associate Professors will stand designated as Professors, and the Spe-

cialists Grade II officers (Non-teaching and Public Health) shall stand designated as Specialists Grade I Officers.

|0) The Senior Medical Officers (Rs. 3000-4500) will be promoted as Chief Medical Officers (Rs. 3700-5000) on completion of six years of regular services as SeniorMedical Officers or on completion of ten years of combined regular service as Medical Officers and Senior Medical Officers of which at least two years shall be as Senior Medical Officers on the basis of seniority-cum-fitness subject to their clearing the bench mark of 'Good' with no zone of selection and without linkage to vacancies. The promotions shall be *in situ* and personal to the officers promoted. Incidentally, this will provide a second time-bound promotion to General Duty Medical Officers, as the first time bound promotion from the level of Medical Officers (Rs. 2200-4000) to the level of Senior Medical Officers (Rs. 3000-4500) on competion of 4 years of service , on seniority-cum-fitness basis, has already been implemented. As at present, the placement of Chief Medical Officers in the Grade Rs. 4500-5700 to the extent of 15 percent of all the senior duty posts of General Duty Medical Officers Sub-cadre, on the basis of the existing guidelines (Overall good performance with atleast two "very good" assessment during the preceding 5 years) will continue. Chief Medical Officers in the scale of Rs. 4500-5700 with 3 years service in the scale of Rs. 4500-5700, or total 17 years of Group A service will continue to be eligible for promotion to the Senior Administrative Grade level posts (Rs. 5900-6700) , subject to availability of vacancies.

(11) All the posts occupied by the Medical Officers/Senior Medical Officers/ Chief Medical Officers/Supertime Grade Officers of the General Duty Medical Officers Sub-cadre of the Central Health Services in the various hospitals and teaching and other institutions, where the functions to be performed are predominately of specialised nature normally required to be performed by Specialist doctors, shall be converted into Specialists posts, which shall be filled as per the existing provisions in the recruitment rules for Specialists. From the General Duty Medical Officers Sub-Cadre, posts equal to the number of Medical Officers/Senior Medical Officers/ Chief Medical Officers/ Super time Grade Officers posts that would be converted into Specialists posts shall be abolished. The conversion of such posts of the General Duty Medical Officers Sub-Cadre in the hospitals and teaching and other institutions to those of Specialists posts will open up opportunities for qualified officers belonging to the General Duty Medical Officers Sub-Cadre to enter the Specialists sub cadre through open competition.

(12) Direct Recruitment at the level of Rs. 4500-5700 as well as Rs. 3700-5700 can be made developing on the identification of the posts.

(13) The benefit of added years of service available under Rule 30 of the Central Civil Services (Pensions) Rules 1972, shall be available for all the members of the Central Health Service.

(14) The feasibility of transferring any part of the work relating to Cadre Management of the Central Health Service to the Directorate General of Health Services and providing more training facilities to the Member of the Central Health Service shall be examined by the Ministry of Health & Family Welfare.

(15) The Ministry of Railways, the Ministry of Defence, and other organisations shall separately process proposals for restructuring the Cadre and providing greater avenues of promotion in the light of decisions taken for the Central Health, Service Cadre by the Government.

(16) The question of increasing the age of superannuation for doctors from 58 to 60 years is defered for more detailed examination by the Department of Personnel & Training regarding its implications and repercussions.

(17) The Department of Personnel & Training (All India Services Division) sahll examine, in due course, the question of formation of an All India Medical and Health Service in consultation with the State Governments.

2. The Government after careful consideration of all aspects have not found it possible to accept other recommendations of the High Powered Committee.

3. The amendments to the Central Health Service Rules, 1982, necessary wherever, consequent upon the above decision, shall issue in due course.

Sd/-
(S. HARIHARAN)
Dy. Secy. to the Govt. of India
Tel. No. 301 4495

Afro-Asian Games

891. SHRI SANAT KUMAR MANDAL: Will the Minister of HUMAN RESOURCE DEVELOPMENT be pleased to state:

(a) whether the Government have taken any decision to hold the first Afro-Asian games in the capital next year; and

(b) if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HUMAN RESOURCE DEVELOPMENT (DEPARTMENT OF YOUTH AFFAIRS AND SPORTS) AND THE DEPARTMENT OF WOMEN AND CHILD DEVELOPMENT (KUMARI MAMATA BANERJEE): (a) No, Sir.

(b) Does not arise.

"Discharge of Domestic Sewage into Coastal Waters"

892. SHRI GANGADHARA SANIPALLI: Will the Minister of ENVIRONMENT AND FORESTS be pleased to state:

(a) the volume of pesticides and synthetic detergents finding their way into the sea annually;

(b) the annual discharge of domestic sewage into coastal waters; and

(c) the steps taken by the Government to monitor marine pollution and to take appropriate action in the matter?

THE MINISTER OF STATE IN THE MINISTRY OF ENVIRONMENT AND FORESTS (SHRI KAMAL NATH): (a) and (b).